

ISSUE CLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>LM</i>		11/30/94
O.I.P.E. CLASSIFIER		65918	12-2-99
FORMALITY REVIEW			12/20/99

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/1/94
2	✓	✓	7/1/94
3	✓	✓	7/1/94
4	✓	✓	7/1/94
5	✓	✓	7/1/94
6	✓	✓	7/1/94
7	✓	✓	7/1/94
8	✓	✓	7/1/94
9	✓	✓	7/1/94
10	✓	✓	7/1/94
11	✓	✓	7/1/94
12	✓	✓	7/1/94
13	✓	✓	7/1/94
14	✓	✓	7/1/94
15	✓	✓	7/1/94
16	✓	✓	7/1/94
17	✓	✓	7/1/94
18	✓	✓	7/1/94
19	✓	✓	7/1/94
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22	✓	✓	7/1/94
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25	✓	✓	7/1/94
26	✓	✓	7/1/94
27	✓	✓	7/1/94
28	✓	✓	7/1/94
29	✓	✓	7/1/94
30	✓	✓	7/1/94
31	✓	✓	7/1/94
32	✓	✓	7/1/94
33	✓	✓	7/1/94
34	✓	✓	7/1/94
35	✓	✓	7/1/94
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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